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James P. Demers	(Depositor's name)
	(Signature)
October 19, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/826,439	04/15/2004	Haoyun An	6319-3000	1057

TITLE OF INVENTION:

QUINOXALINE DERIVATIVES HAVING ANTIVIRAL ACTIVITY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700 (Credit Card)	12/29/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
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TUCKER, ZACHARY C 1624 514-249000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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Brown Raysman Millstein

Felder & Steiner LLP

2

3 James P. Demers

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

VALEANT RESEARCH and DEVELOPMENT

Costa Mesa, CA

10/24/2006 CNEGA2 00000057 10026439

01 FC:1501

1400.00 OP

02 FC:1504

300.00 OP

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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- ☒ Issue Fee
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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

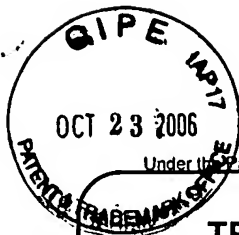
Date October 19, 2006

Typed or printed name James P. Demers

Registration No. 34,320

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

5

Application Number

10/826,439

Filing Date

April 15, 2004

First Named Inventor

Haoyun AN et al.

Art Unit

1624

Examiner Name

Zachary C. Tucker

Attorney Docket Number

6319-3000

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
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<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Brown Raysman Millstein Felder & Steiner LLP (Customer Number 29858)		
Signature			
Printed name	James P. Demers		
Date	October 19, 2006	Reg. No.	34,320

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Signature			
Typed or printed name	James P. Demers	Date	October 19, 2006

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